

United States of America  
Department of Transportation — Federal Aviation Administration  
**Supplemental Type Certificate**

*Number* SA3760SW 190-356  
CRW

*This certificate, issued to* Louisiana-Pacific Corporation  
Route 22, Box 969  
Conroe, TX 77303

*certifies that the change in the type design for the following product with the limitations and conditions  
therefor as specified hereon meets the airworthiness requirements of Part 25 of the Federal Aviation  
Regulations.*

*Original Product — Type Certificate Number:* A10CE  
*Make:* Lear  
*Model:* 35

*Description of Type Design Change:*

Installation of a Louisiana-Pacific digital voltmeter,  
Louisiana-Pacific Part Number 11, in accordance with  
Louisiana-Pacific installation drawing Number 11, dated March  
30, 1987, or later FAA approved revision.

*Limitations and Conditions:*


Compatibility of this modification with previously installed  
equipment must be determined by installer.

*This certificate and the supporting data which is the basis for approval shall remain in effect until sur-  
rendered, suspended, revoked, or a termination date is otherwise established by the Administrator of the  
Federal Aviation Administration.*

*Date of application:* September 17, 1985 *Date reissued:*

*Date of issuance:* April 13, 1987 *Date amended:*



*By direction of the Administrator*  
  
(Signature)  
L. B. Andriesen  
Manager, Aircraft Certification Division  
Southwest Region (File)

Any alteration of this certificate is punishable by a fine of not exceeding \$1,000, or imprisonment not exceeding 3 years, or both.

INSTRUCTIONS: The transfer endorsement below may be used to notify the appropriate FAA Regional Office of the transfer of this Supplemental Type Certificate.

The FAA will reissue the certificate in the name of the transferee and forward it to him.

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### TRANSFER ENDORSEMENT

Transfer the ownership of Supplemental Type Certificate Number \_\_\_\_\_

to *(Name of transferee)* \_\_\_\_\_

*(Address of transferee)* \_\_\_\_\_  
*(Number and street)*

\_\_\_\_\_  
*(City, State, and ZIP code)*

from *(Name of grantor)* *(Print or type)* \_\_\_\_\_

*(Address of grantor)* \_\_\_\_\_  
*(Number and street)*

\_\_\_\_\_  
*(City, State, and ZIP code)*

Extent of Authority (if licensing agreement): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Date of Transfer: \_\_\_\_\_

Signature of grantor *(In ink)*: \_\_\_\_\_